



United States  
Department of  
Agriculture

Agricultural  
Marketing  
Service

1400 Independence Avenue, SW.  
Room 2746-S, STOP 0230  
Washington, DC 20250-0230

## **INSTRUCTIONS FOR COMPLETION OF ELECTRONIC FORM FOR EXPORT HEALTH CERTIFICATE TO THE EUROPEAN UNION**

Applicants for health certificates will be subjected to annual Documentation Reviews to verify compliance in accordance with DA Instruction 918-I, Section 18.E.9. By submitting your request you are certifying that you have documentation to verify the product meets the European Union requirements and all information on the EU Health Certificate. Applicants will be billed for time and travel expenses for the Documentation Reviews and subsequent follow up Reviews.

EU Health Certificates will be billed at the rate of one hour of the currently published hourly rate. Certified Copies will be billed at the rate of ½ hour of the currently published hourly rate. Additional services, such as faxes or special handling will result in additional charges. Current hourly rates are published in the [Federal Register](#).

Certificates will be dated the day they are printed and signed by the USDA AMS representative. All European Union countries require export certificates to be dated prior to shipment. **ALLOW UP TO 3 DAYS FOR PROCESSING A PROPERLY COMPLETED FORM.** It is the exporters' responsibility to request certificates in enough time to comply with this requirement.

It is the exporters' responsibility to discuss all European Union requirements with importing customers to verify that they meet all of the packaging and labeling requirements of the importing country prior to shipping product.

USDA AMS reserves the right to edit information provided. Statements and qualifications such as Organic, Kosher, US Origin, Halal, Extra Grade, Grade AA, GM free etc. that cannot be supported by USDA will not be carried forward to the final certificate. USDA AMS will deny requests if major editing is needed to be able to certify the information.

### **Applicant**

**Applicant Number** – Provide Company USDA AMS Account number for billing; Number can be verified or obtained from Bari Kinne at 630-437-507 or Bari.Kinne@ams.usda.gov

**Contact** – Provide name of person to contact for questions regarding certificate application.

**E-mail address** – Provide e-mail address for contact person. This e-mail address will receive notice that the application has been accepted or rejected.

**Telephone** – Provide telephone number for contact person including area code and country code as applicable.

**Fax** – Provide fax number for contact person (optional)



United States  
Department of  
Agriculture

Agricultural  
Marketing  
Service

1400 Independence Avenue, SW.  
Room 2746-S, STOP 0230  
Washington, DC 20250-0230

### **Mail Certificate to**

**If Applicant wants the certificate to be returned by overnight courier an electronic airway label must be provided as one of the attachments on the application. For shipments to the United Kingdom, Ireland, Belgium and Norway, an airway label must be provided for the appropriate USDA Animal and Plant Health Inspection Service APHIS office for their signature on the animal health attestations. The following information is requested only as backup to this attachment. If no airway label is attached, the official Health Certificate will be returned to the address provided via U.S. Mail. Federal Express is scheduled to pick up envelopes daily, other courier services will be scheduled as needed and may not be picked up the same day as the day the request is processed, based on the courier's schedule.**

**Contact** – Provide name of mail recipient.

**Company name** – Provide name of company. (optional)

**Street** – Provide complete street address for method of return courier service or United States Postal Service.

**City, State, Zip Country** – Provide City State, Postal Zip Code and Country (if not USA).

**Courier contract#** - Provide courier company and your contract number, i.e. Fed EX 123456

**Copies** – Provide number of Certified copies requested. (optional)

**Fax copy** – Complete if Fax copy requested. (optional)

#### **1. Consignor**

**Company Name** – Provide name of Consignor.

**Street Address** – Provide complete street address of Consignor.

**City, State, Zip** – Provide City, State Abbreviation and Zip Code of Consignor.

**Country** – Provide country of Consignor.

#### **2. Consignee**

**Company Name** – Provide name of Consignee.

**Street Address** – Provide complete street address of Consignee.

**City, Zip** – Provide City, Zip Code of Consignee.

**Country** – Provide country of Consignee.

#### **3. Origin of the milk and milk-based product**

**Plant#1** – Select manufacturing facility that made the final product being exported; sort by company name or by European Union approval number (to switch between searches, toggle to the blank space at the top of the list)

**Plant#2** – Select if more than one manufacturing facility made final products in consignment i.e. cheese made in company X, butter made in company Y; select N/A if only one facility manufactured all product in shipment. (to switch between searches, toggle to the blank space at the top of the list)



United States  
Department of  
Agriculture

Agricultural  
Marketing  
Service

1400 Independence Avenue, SW.  
Room 2746-S, STOP 0230  
Washington, DC 20250-0230

**4. Place of Loading Exportation**

**Company name** – Provide the company name where product is loaded for shipment. (optional)

**Street Address-** Provide street address where product is loaded for shipment. (optional)

**City, State, Zip** – Provide City and State where product is loaded for shipment. (zip optional)

**5. Intended Destination of the Product**

**EU Country** – Select EU Country where product is being shipped.

**Company name** – Provide the company name that is receiving the product. (optional)

**Street Address-** Provide street address where product is being shipped. (optional)

**City, Province** – Provide City and/or Province where product is being shipped.

**Country** – Provide country where product is being shipped.

**6. Means of Transport and Consignment Identification**

**Means of Transport** – Select method of shipment from US to EU.

**Registration numbers(s), ship name or flight #** - Provide ship name, flight number or registration numbers, or select “Unknown at time of issue” as appropriate.

**Product Description** – Provide brief/simple description of product i.e. ice cream, variety of cheeses, whey protein concentrate, whey protein product, supplemental whey protein beverages, etc. (100 character maximum)

**Container#** - Provide container number(s) as appropriate\*. (100 character maximum)

**Seal#** - Provide seal number(s) as appropriate\*. (100 character maximum)

**\*The requirement to include the container number(s) and/or seal number(s) varies by country.**

**Contact your importer prior to shipment to confirm whether this information must be present on your certificate.**

**7. Identification of the product**

**Code Number** – Provide means of traceability of product being certified i.e. Item codes, purchase Order Numbers, etc.

**Type of Packaging** – Provide brief / simple description of packaging i.e. corrugated boxes, 25 Kg bags, 200 lb totes, etc.

**Number of packaging units** – Provide total number of packages for the dairy products included in the shipment covered by the requested certificate.

**Net Weight-** Provide the total net weight for the dairy products included in the shipment covered by the requested certificate.